



Miami-Dade Water and Sewer Department Showerhead Exchange and Retrofit Kit
Program
Large Volume Requests

Thank you for your interest in the Department's Showerhead Exchange and Retrofit Kit Program.

Terms and Conditions

The Showerhead Exchange and Retrofit Kit Program require participants to exchange their existing showerheads in order to receive a high-efficiency model. However, owners of multi-unit residential compounds, such as condominiums or apartment buildings, are eligible for a **"Large Volume Distribution."** The building manager or Homeowner Association President can make the request for the number of units in their buildings.

To be eligible for a Large Volume Distribution, an applicant must present evidence of ownership of a multi-unit residential building of 15 or more units. This agreement must be read, completed and returned, with all supporting documentation, to the Water Use Efficiency Program, 3071 SW 38 Ave. Suite 565 Miami, FL 33146. Approval of a Large Volume Distribution is at the Department's sole discretion.

Upon approval, the applicant will be contacted and informed where to pick up the high-efficiency showerheads. By signing this agreement the applicant commits to installing the number of showerhead and other water saving fixtures provided. A report providing number of showerheads replaced and date of completion of installation must be provided to the Water Use Efficiency Office. **Failure to provide this information will result in the applicant being billed for the price of the showerheads and retrofit kit.**

I acknowledge that I have read the above Terms and Conditions and agree to be bound by the terms set forth therein.

Signature _____

Name _____ Phone Number _____

Development/Apartment/Condo Name _____ Total
of Units _____ 1 bath _____ 2 baths _____

FULL Address _____ Account # _____
(if known OR municipality)

Year building was built: _____

# of High-efficiency Distributed _____	Date Distributed _____	# Returned _____	Date Returned _____
# of High-efficiency Distributed _____	Date Distributed _____	# Returned _____	Date Returned _____
# of High-efficiency Distributed _____	Date Distributed _____	# Returned _____	Date Returned _____
# of High-efficiency Distributed _____	Date Distributed _____	# Returned _____	Date Returned _____

Name of WASD Employee _____ Exchange Location _____

The County does expressly disclaim any and all warranties with respect to this product, and does not warrant or represent the fitness of this product for any particular use. Product is provided as-is. Acceptance and use of this product is at the customer's risk, and by acceptance of this product customer agrees that the County shall not be liable for any damages of any kind, including consequential damages, in law or equity, which may arise out of or result from use of the product by Customer. In the event that the product is defective, provision of a replacement product from the County shall be the Customer's sole remedy. The County shall not be responsible for installation of the product under any circumstances.